

PATENT

ATTORNEY DOCKET NO. 04148-00005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Layrolle et al.) Examiner:	Jennifer Kolb
Serial No.: 09/757,344) Art Unit:	1762
Filed: January 9, 2001)	
Title: METHOD FOR COATING MEDICAL IMPLANTS))	RECEIVED
Assistant Commissioner for Patents Washington, D.C. 20231		TC 1700

TRANSMITTAL LETTER

Sir:

In regard to the above identified application, we are transmitting herewith the attached:

- 1. Amendment and Response to Office Action,
- 2. Version of Amendments with Markings to Show Changes Made,
- 3. Petition for Two-Month Extension of Time, and
- 4. Return postcard.

With respect to additional fees:

- A. No additional fee is required.
- B. An additional fee is required and has been calculated as shown below:

CLAIMS AS A	MENDÉD					
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	12	Minus	20	0	X \$9	= \$0.00
Indep. Claims	2	Minus	3	0	X \$42	= \$0.00
		Total Additional Claims Fees		\$0.00		
Petition/Request for Extension of Time		2 months		\$200.00		
			Total Additional Amendment	al Fees for this		\$200.00

^{*} If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

	C.	Attached is a check in the amount of \$
	D.	The Commissioner is hereby authorized to charge the total additional fee to our Deposit Account No. 19-0733. A duplicate copy of this sheet is enclosed.
<u>X</u>	E.	The Commissioner is hereby authorized to charge the Petition fee of \$200.00 to Deposit Account No. 19-0733.

The Commissioner is hereby authorized to charge any additional fees or credit overpayment to Deposit Account No. 19-0733.

Respectfully submitted,

Dated: 00 100 27, 700

Ву

John P. Iwanicki, Reg. No. 34,628 DANNER & WITCOFF, LTD.

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^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

^{***} Each multiple dependent claim should be counted as the number of claims from which it depends.